

# **SCHEDULE A (FEC Form 3)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d  
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)  
**Forbes for Congress**

Full Name (Last, First, Middle Initial) <b>Thomas Godfrey</b>			Date of Receipt M M / D D / Y Y Y Y Y Y <b>05 / 21 / 2012</b>	
Mailing Address <b>805 S. Spigel Drive</b>			<b>Transaction ID : 20525.C17841</b>	
City <b>Virginia Beach</b>	State <b>VA</b>	Zip Code <b>23454</b>	Amount of Each Receipt this Period Receipt 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		Occupation president/CEO		
Name of Employer Colomas Shipyard		Election Cycle-to-Date 1500.00		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				

Full Name (Last, First, Middle Initial) <b>James Gravely</b>			Date of Receipt M M / D D / Y Y Y Y Y Y <b>04 / 16 / 2012</b>	
Mailing Address <b>1257 Parkside Place</b>			<b>Transaction ID : 20503.C17618</b>	
City <b>Virginia Beach</b>	State <b>VA</b>	Zip Code <b>23454</b>	Amount of Each Receipt this Period Receipt 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		Occupation Contractor		
Name of Employer GEM Building Corp		Election Cycle-to-Date 500.00		
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				

Full Name (Last, First, Middle Initial) <b>Brett Hartman</b>			Date of Receipt M M / D D / Y Y Y Y Y Y <b>05 / 08 / 2012</b>	
Mailing Address <b>924 Riley Drive</b>			<b>Transaction ID : 20525.C17811</b>	
City <b>Chesapeake</b>	State <b>VA</b>	Zip Code <b>23322</b>	Amount of Each Receipt this Period Receipt 500.00	
FEC ID number of contributing federal political committee. <b>C</b>		Occupation Vice President		
Name of Employer Truck Enterprises, Inc.		Election Cycle-to-Date 2000.00		
Receipt For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)				

<b>SUBTOTAL</b> of Receipts This Page (optional).....			1500.00	
<b>TOTAL</b> This Period (last page this line number only).....				